



**DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF DEVELOPMENTAL DISABILITIES SERVICES**

**GOVERNOR'S ADVISORY COUNCIL
TO THE DIVISION OF DEVELOPMENTAL DISABILITIES SERVICES**

July 15, 2014

The Governor's Advisory Council to the Division of Developmental Disabilities Services met on July 15, 2014, at the 1056 Woodbrook Conference Room, Dover.

COUNCIL MEMBERS PRESENT: Anthony Horstman, Chair
Timothy F. Brooks, Ed.D.
Thomas Rust
Jamie Doan
Angie Sipple
Terri Hancharick

COUNCIL MEMBERS ABSENT: N/A

STAFF MEMBERS PRESENT: Jane Gallivan
Marie Nonnenmacher, via conference call
Warren Ellis
Pat Weygandt
Lennie Warren
Vicky Gordy - minutes

GUESTS PRESENT: Vicki Haschak
Gary Cassedy
Terry Olson

CALL TO ORDER: The meeting was called to order at 1:00 p.m.

NEXT MEETING: September 16, 2014 – 11 a.m. – 1 p.m.
1056 Woodbrook Conference Room, Dover

APPROVAL OF MINUTES: The minutes from the June 15, 2014 were approved.

Additions to the Agenda

No additions reported.

Housing Vacancies

Currently there are 33 vacancies statewide (3.9%); 20 in group/neighborhood homes (nine are ARC homes) and 13 in CLA's. Development of CLA's continue. Newly developed apartments vacancies are not counted as vacancy until it has been initially filled. Vacancies fluctuate continuously. Shifting of individuals occurs, therefore the number of vacancies may be the same, but movement may have occurred. Recently an individual chose to move from a CLA to a group home. Some group homes support a specific type of individual, which may present vacancies, as well. Highest priority individuals received letters to shop for placement, with a minimum of 50 individuals currently shopping for placement. Individuals that take a long period of time to identify choice of placement do not affect placements of others (placements are made on a first come, first served basis).

DDDS promotes shared living placements, although there are not many vacancies and individuals have choice of where they prefer to reside. DDDS has been contemplating privatizing the Shared Living program and may begin to move forward for this program to be an addition to the waiver. It is DDDS belief that provider agencies would be better at marketing the Shared Living program. Although current Shared Living providers are not invited to DDDS Quarterly Provider Meetings, meetings with Shared Living providers take place at least annually during contract signing. There is also a distribution list to send group e-mails to shared living providers. Shared living providers have a network and speak amongst each other often.

Family Support Waiver – Status/Details/Costs

Jane Gallivan met with Secretary Landgraf, Representative Melanie George Smith, and Senior Legislative Analyst Kimberly Reinagel-Nietubicz to clarify the epilogue language. The discussion revealed that DDDS is to develop family support waiver models to present as choices to families. Feedback from families will be an essential piece of this process. Reportedly, some families support the self-directed model (family controls funds by choosing approved services) while others support funding for day services being standardized while family controls any remaining funding to choose approved services. Both of these options may be placed in the same family support waiver (FSW). Cost neutrality and the requirement to hire nine additional DDDS/ DMMA staff was discussed during the meeting.

Due to DDDS discussions with DHSS, a portion of DDDS state funding was set aside for those individuals who are not Medicaid eligible. DHSS could not support past attempts of developing a family support waiver due to this not being included, as without some individuals could be denied services.

Epilogue language reveals that DDDS must report by 2016 (no specific date given). DDDS will request additional funding for the nine required positions to support the FSW via the FY16 budget request.

The Council discussed an approximate timeline of finalizing a family support waiver, which was determined to be 2017 – 2018 due to many obstacles, (i.e. meeting with families, complexity of writing application, new waiver applications rarely receive approval of CMS within 90 days, etc.).

Judge Rotenberg Center

DDDS reviewed the contract with JRC carefully, which revealed that revisions were necessary. DDDS revised contract to present a clear understanding of allowable services to include no waiver of requirements, although the current contract was extended until September 30, 2014, due to billing. If JRC does not agree to the revised contract, essentially they are choosing not to be a DDDS provider. JRC has asked what can be negotiated as a compromised position with DDDS. DDDS has given the opportunity to JRC to be a qualified provider as evidenced by DDDS's position of, if JRC can develop a plan to fade and terminate intrusive therapy practices over a certain period, DDDS will accept JRC as an approved provider. Therefore, DDDS is not denying Medicaid services, just stating that JRC must comply with Medicaid standards.

The appeal process is continuing to include reports that a hearing officer determined that Medicaid services are not being denied. The two individual's appeals reached the Delaware Superior Court. Certain DDDS staff member will attend as expert witness. The current contract as well as the revised contract includes that JRC must work collaboratively with DDDS to identify a new vendor for both individuals, if necessary.

FDA continues to review and may deny these types of electrical devices used on humans.

GAC Appointment Dates

The GAC Appointment dates were distributed to Council, which revealed that all members, with the exception of Timothy Brooks, Ed.D, are appointed until July 24, 2016. Mr. Brooks will apply for reappointment to the Governor, per Council Chair. The Council Chair continues to discuss the vacant seat on the Council with the Governor's Office, who is also aware and seeking nominations. Contacts were made from Council member's suggestions, although no responses have been received to date. The vacant seat must reside in Delaware. Currently, the Council has no members from Kent County. The suggestion of seeking/nominating a self-advocate for the Council vacant seat was made.

CMS Rule on "Community" and Sheltered Workshop

Guidance from CMS regarding community rule has not been revealed to date. This rule affects any program that receives Medicaid funding. CMS was performing public presentations but halted due to inconsistent messages being shared depending upon group. A meeting is scheduled for July 30th to discuss moving forward to include the following state director's associations: DDDS, Aging, Medicaid, Brain Injury, Mental Health, and the leadership staff of CMS. Challenges include CMS's perception of guidance and unrealistic expectations for states (i.e. state to visit every home to determine if home complies with regulations). The process of writing guidance as well as monitoring and measuring is challenging.

A handout identifying the number of individuals 65 years of age and over who are enrolled in prevocational and day program activities was distributed to Council. Council member asked if there is a specific age that an individual retires from a sheltered workshop or day program. At this point, no specific age or date has been established by DDDS for an individual to retire. DDDS addresses on a case-by-case basis, depending upon individual. DDDS has identified a team to define aging in place and to develop a clear plan to include monitoring to measure standards. There must be a commitment by everyone supporting the system to make it work.

Council member reported the Delaware has no programs in the community for an individual with physical disabilities to partake in a passive exercise program.

Dental Services

During the meeting with Representative Smith, a discussion surrounding the cost of possible additional services, (i.e. dental) was had. Other state models for dental services provide price caps on dental services individuals may receive, based on specific criteria. Although costly, DDDS has developed a standardized rate schedule for dental services. Discussion included that education seems to be lacking as families are often advised by advocates to drop primary insurance and place individual on Medicaid, wholly. Some private insurance policies cover dental services, but may be costly. Dental insurance may be purchased privately.

Quarterly Provider Meeting

The GAC requested a copy of the minutes from the Quarterly Provider Meetings. DDDS would like to discuss further as this is not a public meeting. In the past per GAC, outsiders were invited. DDDS questions if this should continue. DDDS's intent is not to exclude anyone, although the meeting is held specifically for agency provider participation. Some agency providers voiced that the tenor of the meeting changes when non-providers attend. History presents that Quarterly Provider minutes were not widely distributed. GAC sees role as trying to advise DDDS on current issues that affect constituencies and feel they should have access to attend and receive minutes in an effort to gain knowledge. GAC will follow up to determine if Quarterly Provider Meetings qualify as public meetings.

Executive Board Retreats

The Council suggested the possibility of having a yearly retreat for DDDS staff and Council members. During a retreat members could freely discuss resources needed to support DDDS functions and/or particular areas of focus and how or what information can DDDS contribute to keep Council well informed. One Council member suggested identifying the service differences of family support services and residential services at the retreat. The DDDS Director and Council Chair will discuss scheduling options for this fall.

Census Report

The DDDS Census Comparison for FY13 thru FY14 report to include quarterly data was distributed to Council. DDDS received a preliminary report from Applicant Services that includes ages and diagnosis of new populations from FY14 that may be available for the September Council meeting. During FY14, DDDS population increased by 271 individuals. The census at Stockley Center ICF program is currently at 55. Admissions occur at Stockley Center for rehabilitation; once rehabilitation is complete, in some cases, the individual chooses to stay at Stockley Center.

Family members are excited about plans being in place for the individuals at Morris Manor (a group home located on Stockley Center Campus) to move to a home in New Castle County. Preliminary discussions with DDDS, ARC, and agency providers were had regarding providing a choice for other individuals who reside in home on Stockley Center campus. After all

individuals move, that will eliminate all waiver homes on Stockley Center campus to become compliant with “community” regulations. This process has been relatively smooth, to date. A move date of August 1st has been established for the group home located on the campus of Governor Bacon Health Center.

Please note that DDDS has 271 more people eligible for services moving into FY15, although no increase in DDDS staffing has occurred to manage. DDDS staff has decreased. DDDS is at the point where functions may require privatization.

Quality Standards per Epilogue Language

Secretary Landgraf, Representative Melanie George Smith, Senior Legislative Analyst Kimberly Reinagel-Nietubicz, and Jane Gallivan discussed the epilogue language surrounding the development of a work group to plan to develop additional quality standards. Rep. Smith spoke of being approached by many advocates advising that DDDS quality outcomes be reviewed and revised before additional funding is released per the rate report. Epilogue language reveals that DDDS is charged with grouping members. DDDS expressed concern that no self-advocate or self-advocate group was named to participate in group, which is a major oversight from DDDS perspective. Rep. Smith assured DDDS that one representative appointed by the JFC would reflect a self-advocate or self-advocacy group member.

DDDS asked about the broad group membership, which must be published due to being part of epilogue language in the budget bill (by nature this must be a public meeting). Rep. Smith voiced concerns of receiving an overabundance of public comment. DDDS is willing to work to expectations although no funds are mentioned to facilitate meetings, contract with a best practice expert or provide support for report writing. Upon further discussion with Rep. Smith, it remains unclear who will act as group chairperson.

DDDS is anticipating the appointment of group chairperson. Given the size of group and differing opinions, DDDS has concerns of producing a suitable report. DDDS is mandated to report findings to JFC no later than April 1, 2015. DDDS is currently working toward a family support waiver, amending the HCBW to include other services, and moving towards a targeted case management system to improve services to families. Concerns of time and funding are apparent to DDDS.

Mary Lou Bourne is a national expert who has begun to look at providing payments for outcomes in the Medicaid system. An outcome measure system must be in place before quality standards are identified. Implementing a system to include continuous monitoring of quality with different data sets, to include providing payments will require hiring or contracting of employees with different skill sets than current DDDS employees.

GAC Chair contacted Rep. Smith’s office asking why a GAC member was not represented within group, which was reportedly an oversight. Rep. Smith reported that the appointees would be assigned to the work group in approximately a month and a half. The GAC Chair sent background information and relayed interest in being appointed to work group.

Announcements and Informational Items

Jane Gallivan, Director of DDDS was appointed to the Autism Educational Task Force, as written in Senate Concurrent Resolution 65 – Creating an Autism Educational Task Force.

The National Report on Employment Services and Outcomes from 2013 pertaining to Delaware was distributed to Council. This also included a nationwide table statistical review.

The GAC meetings will be held on the third Tuesday of the month (except for August and December), rotating start time from 1 p.m. to 11 a.m. to meet needs of members.

Demonstrations for the electronic case managing systems are scheduled to occur at Fox Run beginning at 10 a.m. as follows: July 21st (Therap), 22nd (Core Solutions), and 24 (CNT InfoTech).

The GAC presented Dr. Warren Ellis, DDDS Community Services Director, with a card and gift for his retirement, effective September 1, 2014.

Adjournment

The meeting adjourned at 3:10 p.m.